

**SF-IVP**State Form 46635
(R / 01-02)

Indiana Department of Revenue

IMPORTER**VERIFICATION PAYMENT VOUCHER****Payment is due 3 business days after the transaction.**

Name of License Holder (as indicated on license)			License Number	
Mailing Address			FEIN/SSN	
City or Town	State	Zip Code	Business Telephone Number ()	
Import Verification Number V-	Date Verification Requested	Transporter License Number	Bill of Lading Number	Bill of Lading Date

A person desiring to import special fuel to an Indiana destination, in a transport vehicle having a capacity of 5,400 gallons or more, who does not enter into an agreement to prepay Indiana Special Fuel Tax to a Supplier or Permissive Supplier must do the following:

- Obtain a valid Importer License;
- Obtain an Import Verification Number from the Department no earlier than twenty-four (24) hours before entering the state with each import by calling (317) 615-2623;
- Display a proper Import Verification Number on the shipping document; and
- File this voucher with your payment within *3 business days* after the earlier of: (1) the date the valid Import Verification Number was assigned, or (2) the time the fuel entered into Indiana.

A **separate** Import Verification Payment Voucher must be sent for each Import Verification Number obtained.

1. Total Gallons of Taxable Special Fuel Imported into Indiana	1.					
2. Tax Due (Multiply Line 1 by \$0.16)	2.	\$				
3. Collection Allowance (Multiply Line 2 x .016) (If return is filed or tax paid after the due date, enter zero)	3.	\$				
4. Total Tax Due (Line 2 minus Line 3)	4.	\$				
5. Penalty (Penalty must be added if report is filed after the due date - 10% of Line 2 tax due or \$5.00, whichever is greater.)	5.	\$				
6. Interest (Interest must be added if the tax is paid after the due date, call the Department for daily interest rate)	6.	\$				
7. Total Amount Due (Add Lines 4, 5 and 6)	7.	\$				
8. Adjustment - Schedule E-1 Must Be Attached and is Subject to Approval. Circle	8.	\$				
9. Adjusted Amount Due (Line 7 + or - Line 8)	9.	\$				
<table border="1"><tr><td colspan="2">For Department Use Only</td></tr><tr><td>Check Amount:</td><td>Check Number:</td></tr></table>			For Department Use Only		Check Amount:	Check Number:
For Department Use Only						
Check Amount:	Check Number:					

Make check payable to **Indiana Department of Revenue** and mail check and return to: **P.O. Box 6080, Indianapolis, Indiana 46206-6080. Include your Importer's License Number on check.** Under penalty of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief it is true, correct, and complete. I further declare that complete and proper records are on file at the address indicated above for all fuel reported on this return.

Taxpayer or Authorized Agent	Typed or Printed Name	Title
	Date Signed	Telephone Number ()
Please Check Box If Last Filing <input type="checkbox"/> Date Business Closed		

**INSTRUCTIONS FOR COMPLETING
IMPORTER VERIFICATION PAYMENT VOUCHER
SF-IVP**

WHO SHOULD FILE THIS FORM?

The Form SF-IVP should be filed by every person who has not previously entered into a tax pre-collection agreement with their supplier or permissive supplier and who imports special fuel from another state into Indiana in vehicles with a capacity greater than 5,400 gallons.

WHEN IS THIS FORM AND PAYMENT DUE?

This voucher must be submitted with your payment within **3 business days** after the earlier of:

- 1) the date the valid Import Verification Number was assigned, or
- 2) the time the fuel entered into Indiana.

A separate Import Verification Payment Voucher must be sent for each Import Verification Number obtained from the Department.

**HOW DO I OBTAIN IMPORT
VERIFICATION NUMBERS?**

If you have not previously entered into a pre-collection agreement with your supplier or permissive supplier, it will be necessary for you to contact the Department prior to importing special fuel into Indiana in vehicles with a capacity greater than 5,400 gallons. To obtain an import verification number, call the Department at 317-615-2623. This is available 24 hours per day, 7 days per week.

HOW DO I COMPLETE THE SF-IVP FORM?

Enter your identifying information as it is reflected on your Indiana Special Fuel Importers License.

Import Verification Number - This is where you should indicate the number issued by the Department for each load imported. The import verification number begins with a "V" followed by a four (4) digit number.

Date Verification Requested - This is the date on which you contacted the Department and were issued the Import Verification Number.

Transporter License Number - This is where you should indicate the Special Fuel Transporter's License Number. This may be you.

Bill of Lading Number - This is the number indicated on the terminal issued shipping document.

Bill of Lading Date - This is the date indicated on the terminal issued shipping document.

LINE INSTRUCTIONS:

Line 1: Enter the gallons of taxable special fuel imported into Indiana.

Line 2: Multiply Line 1 by \$0.16, and enter tax due.

Line 3: Multiply Line 2 by .016. This is the amount of collection allowance which you are entitled to if the return is filed on or before the due date. If your payment is late, you are not entitled to this allowance.

Line 4: Line 2 minus Line 3, and enter total tax due.

Line 5: Enter penalty due. If your payment and return are filed after the due date, calculate a penalty of 10% of Line 4, or \$5.00, whichever is greater.

Line 6: Enter interest due. Interest must be calculated on all payments and returns filed after the due date. First, multiply Line 4 times the number of days the payment is filed past the due date. Multiply this total by the daily interest factor (call the Department for the daily interest factor). This is the total you enter as the amount of interest due.

Line 7: Add Lines 4, 5, and 6, and enter the total amount due.

Line 8: This line is used to report any adjustments to the amount of tax due. You **MUST** contact the Department to receive a Schedule E-1 on which the adjustment must be explained. All adjustments must be pre-approved by the Department. Circle + / - to indicate whether it is a positive or negative adjustment, and enter adjustment amount.

Line 9: Enter adjusted amount due and include your payment. Line 7 plus or minus Line 8.

Mail your payment and return to:
Indiana Department of Revenue
P.O. Box 6080
Indianapolis, Indiana 46206-6080

If you have questions, you may write us at the address above or call us at (317) 615-2623.